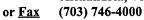
## PART B - FEE(S) TRANSMITTAL

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APPLICATION NO.	FILING DATE		FIRST NAMEI	INVENTOR			ATTORNEY DOCKET NO.		CONFIRMATION NO.	
10/767,360	01/29/2004	Thomas David Steph			cClelland		1981/704		4888	
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1. Change of correspondence CFR 1.363).  Change of correspond Address form PTO/SB/12  "Fee Address" indicate PTO/SB/47; Rev 03-02 of Number is required.	2. For printing on the patent front page, list  (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  BRINKS HOFER GILSOI									
PLEASE NOTE: Unless recordation as set forth ir  (A) NAME OF ASSIGN  SCHRADER-	BRIDGEPORT I	elow, no assignee of this form is NO (E NTERNATIO	data will app T a substitute B) RESIDENC DNAL, I	ear on the for filing EE: (CIT	he patent. If an a g an assignment. Y and STATE OF	R COUI	NTRY) <b>Dee</b>	rfield	, IL	
Please check the appropriate	assignee category or catego	ries (will not be pr	inted on the p	atent) :	Individual	<b>XX</b> Cor	poration or	other private gr	roup entity 🗖 Go	vernment
4a. The following fee(s) are  Issue Fee  Advance Order - # of	b. Payment of Fee(s):  A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 23-1925 (enclose an extra copy of this form).									
	(from status indicated above MALL ENTITY status. See	•	☐ b. Applic	ant is no	longer claiming	SMALI	L ENTITY s	tatus. See 37 C	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the reco	is requested to apply the Issublication Fee (if required) vords of the United States Pate	ne Fee and Publica will not be accepted ent and Trademark	tion Fee (if and from anyone Office.	y) or to other th	re-apply any previan the applicant;	viously a regist	paid issue for tered attorne	ee to the applic y or agent; or t	ation identified ab the assignee or oth	ove. er party in
Authorized Signature _	Mu Color	ch			Date _	1	April	27, 200	05	
Typed or printed name _	John G. Raud	ch	-		Regist	ration N	No. 37,	218		

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